PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
T _T (OTAL CLAIMS		(Column 1)		(Colu	(Column 2)		TYPE		OR I	SMALL	
TOTAL CLAIMS			22				-	RATE	FEE]	RATE	FEE
FC)R 		NUMBER FILED		NUMBER EXTRA		1	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		• 2_		Ì	X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			3 mi	nus 3 =	* 2			X43=		OR	X86=	172
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter						column 2	L	TOTAL	-	OR	TOTAL	978
CLAIMS AS AMENDED - PART II							OTHER THAN					
		(Column 1)		(Colun		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME.	Independent	*	Minus	***		=	ſ	X43=		OR	X86=	; ;
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR				CLAIM			.145_			+290=	
		L	+145=		OR	+290= TOTAL						
		Α	DDIT. FEE		OR ,	ADDIT. FEE						
(Column 1) (Column 2) (Column 3)								 ,				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVICE PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	,
	Independent	*	Minus	***		=	-	X43=		OR	X86=	
Ľ	FIRST PRESE		+145=		OR	+290=						
								TOTAL		00	TOTAL	
								DDIT. FEE		OR ,	ADDIT. FEE	
		(Column 1) CLAIMS	;	(Colun		(Column 3)	_					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	addi- Tional Fee
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	-	X43=			X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEPENDENT		CLAIM		·	7402		OR	700-	
+145=										OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		ber Previously Pai					r foun	nd in the app	ropriate box	in col	umn 1.	